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## BIB DATA SHEET

CONFIRMATION NO. 1482

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT                    | ATTORNEY DOCKET<br>NO.                                       |                               |                                    |
|---|---|--|-----------------------------------|--|-------------------------------|------------------------------------|
| 10/784,507  | 02/23/2004<br>RULE  | 235  | 2887                              | 1326.001US5  |                               |                                    |
| <b>APPLICANTS</b><br>Ken Rosenblum, Mendota Heights, MN;<br><b>** CONTINUING DATA *****</b><br>This application is a CON of 10/328,420 12/23/2002 PAT 6,697,704<br>which is a CON of 09/714,802 11/16/2000 PAT 6,529,801<br>which claims benefit of 60/210,303 06/08/2000<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/17/2004 |   |  |                                   |  |                               |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /THIEN T MAI/<br>Acknowledged Examiner's signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>MN | <b>SHEETS<br/>DRAWINGS</b><br>40                             | <b>TOTAL<br/>CLAIMS</b><br>16 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>SCHWEGMAN, LUNDBERG & WOESSNER, P.A.<br>P.O. BOX 2938<br>MINNEAPOLIS, MN 55402<br>UNITED STATES   |   |  |                                   |  |                               |                                    |
| <b>TITLE</b><br>Automatic prescription drug dispenser   |   |  |                                   |  |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>770   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                   | <input type="checkbox"/> All Fees                            |                               |                                    |
|   |   |  |                                   | <input type="checkbox"/> 1.16 Fees (Filing)                  |                               |                                    |
|   |   |  |                                   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                               |                                    |
|   |   |  |                                   | <input type="checkbox"/> 1.18 Fees (Issue)                   |                               |                                    |
|   |   |  |                                   | <input type="checkbox"/> Other _____                         |                               |                                    |
|   |   |  |                                   | <input type="checkbox"/> Credit                              |                               |                                    |